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Bib Data Sheet

CONFIRMATION NO. 1144

SERIAL NUMBER 10/743,827	FILING OR 371(c) DATE 12/24/2003 RULE	CLASS 604	GROUP ART UNIT 3767	ATTORNEY DOCKET NO. 2625-114
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APPLICANTS

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** CONTINUING DATA *****

NONE BHH

** FOREIGN APPLICATIONS *****

NONE BHH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

04/19/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

6449

TITLE

Fluid infusion apparatus with an insulated patient line tubing for preventing heat loss

FILING FEE RECEIVED 842	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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